



# Revision Submittal Request

Clark County Department of Development Services ~ Building Division  
4701 W. Russell Road ~ Las Vegas NV 89118 ~ (702) 455-3000

Original Application/Project No.: \_\_\_\_\_ Revision No.: \_\_\_\_\_

**This form must be completed by the contractor, developer, architect, engineer or owner upon submitting a request for revisions to the Plans Examination division. Your revision cannot be processed without this information.**

**NOTE: THIS WORKSHEET IS FOR REVISIONS TO PLANS THAT HAVE PREVIOUSLY BEEN APPROVED. IF YOU ARE ADDING ADDITIONAL SCOPE OF WORK, A NEW PERMIT WILL BE REQUIRED.**

## ORIGINAL PROJECT INFORMATION

Project Address: \_\_\_\_\_  
(Include suite/space no. or letter designation if applicable.)

Project Name: \_\_\_\_\_

## CONTACT INFORMATION

Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

## DESCRIPTION

Provide a comprehensive description of the revision being submitted:

Sheet & detail numbers, if applicable:

## ITEM TYPE

## FOR DEVELOPMENT SERVICES' USE ONLY

Check the types of revisions being submitted.

- ☐ Alternate Method
- ☐ Architectural
- ☐ Civil
- ☐ Electrical
- ☐ Exit Plan
- ☐ Fire Protection Report
- ☐ Geotechnical/Grading
- ☐ Mechanical
- ☐ Plumbing
- ☐ Smoke Control Diagram
- ☐ Steel Fire Proofing
- ☐ Structural
- ☐ Zoning

Alternate Method  
Architectural  
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Steel Fire Proofing  
Structural  
Zoning

DVD: _____	Fee: \$ _____
Time: _____	Fee: \$ _____
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## PLEASE CHECK THE APPROPRIATE BOXES.

### ZONING

YES	NO	ITEM DESCRIPTION
<input type="checkbox"/>	<input type="checkbox"/>	Change of use
<input type="checkbox"/>	<input type="checkbox"/>	Apartment/condominium unit reconfiguration (increase/decrease of unit square footage)
<input type="checkbox"/>	<input type="checkbox"/>	Change in any reflective materials
<input type="checkbox"/>	<input type="checkbox"/>	Parking
<input type="checkbox"/>	<input type="checkbox"/>	Landscaping
<input type="checkbox"/>	<input type="checkbox"/>	Curb cut locations
<input type="checkbox"/>	<input type="checkbox"/>	Parcel accessibility
<input type="checkbox"/>	<input type="checkbox"/>	On-site circulation
<input type="checkbox"/>	<input type="checkbox"/>	Trash enclosure location
<input type="checkbox"/>	<input type="checkbox"/>	Area lighting (change of location or height)
<input type="checkbox"/>	<input type="checkbox"/>	Any exterior elevation changes
<input type="checkbox"/>	<input type="checkbox"/>	Wall/fence (location/height)
<input type="checkbox"/>	<input type="checkbox"/>	Building setbacks
<input type="checkbox"/>	<input type="checkbox"/>	Building footprint*
<input type="checkbox"/>	<input type="checkbox"/>	Scope of site improvements (increase/decrease)
<input type="checkbox"/>	<input type="checkbox"/>	Building square footage (increase/decrease)
<input type="checkbox"/>	<input type="checkbox"/>	Site plan changes
<input type="checkbox"/>	<input type="checkbox"/>	Lot dimensions
<input type="checkbox"/>	<input type="checkbox"/>	Basement added/deleted
<input type="checkbox"/>	<input type="checkbox"/>	Location of building on lot (increase/decrease building setback from property line or right-of-way)
<input type="checkbox"/>	<input type="checkbox"/>	Increase/decrease in height of structure
<input type="checkbox"/>	<input type="checkbox"/>	Obscure windows (change from)
<input type="checkbox"/>	<input type="checkbox"/>	Change of roof pitch
<input type="checkbox"/>	<input type="checkbox"/>	Change in color of exterior
<input type="checkbox"/>	<input type="checkbox"/>	Addition of cooking facilities
<input type="checkbox"/>	<input type="checkbox"/>	Change to floor plan
<input type="checkbox"/>	<input type="checkbox"/>	Other: _____

### ARCHITECTURAL

YES	NO	ITEM DESCRIPTION
<input type="checkbox"/>	<input type="checkbox"/>	Alterations or modifications to architectural plans
<input type="checkbox"/>	<input type="checkbox"/>	A narrative description of all changes is provided and such changes are clearly indicated on plans with a cloud and delta number
<input type="checkbox"/>	<input type="checkbox"/>	Any alternations in the egress system
<input type="checkbox"/>	<input type="checkbox"/>	Any alternations in the amount of bathrooms or types of bathrooms
<input type="checkbox"/>	<input type="checkbox"/>	Any alternations to the exterior walls or roof
<input type="checkbox"/>	<input type="checkbox"/>	Other: _____

### STRUCTURAL

YES	NO	ITEM DESCRIPTION
<input type="checkbox"/>	<input type="checkbox"/>	Alterations or modifications to structural plans
<input type="checkbox"/>	<input type="checkbox"/>	Alterations or modifications to structural calculations
<input type="checkbox"/>	<input type="checkbox"/>	Submitted plans are wet stamped by a Nevada-licensed engineer?
<input type="checkbox"/>	<input type="checkbox"/>	Submitted calculations are wet stamped by a Nevada-licensed engineer?
<input type="checkbox"/>	<input type="checkbox"/>	Deferred submittal items have a shop drawing review stamp "without exception" from the Engineer of Record?
<input type="checkbox"/>	<input type="checkbox"/>	A narrative description of all changes is provided and such changes are clearly indicated on plans with a cloud and delta number
<input type="checkbox"/>	<input type="checkbox"/>	Structural changes have been coordinated with and are compatible with the requirements of other disciplines
<input type="checkbox"/>	<input type="checkbox"/>	Other: _____

\* NOTE: Any increase in building square footage or additional height will require a supplemental permit.



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### PLUMBING

YES	NO	ITEM DESCRIPTION
<input type="checkbox"/>	<input type="checkbox"/>	Alterations or modifications to plumbing plans
<input type="checkbox"/>	<input type="checkbox"/>	Water or sewer line
<input type="checkbox"/>	<input type="checkbox"/>	Faucet or facility
<input type="checkbox"/>	<input type="checkbox"/>	Other: _____

### MECHANICAL

YES	NO	ITEM DESCRIPTION
<input type="checkbox"/>	<input type="checkbox"/>	Alterations or modifications to mechanical plans
<input type="checkbox"/>	<input type="checkbox"/>	HVAC system
<input type="checkbox"/>	<input type="checkbox"/>	Other: _____

### ELECTRICAL

YES	NO	ITEM DESCRIPTION
<input type="checkbox"/>	<input type="checkbox"/>	Alterations or modifications to electrical plans
<input type="checkbox"/>	<input type="checkbox"/>	Electrical outlets, lights, switches, panels or generators
<input type="checkbox"/>	<input type="checkbox"/>	Electric wiring or conduit
<input type="checkbox"/>	<input type="checkbox"/>	Electric Sign
<input type="checkbox"/>	<input type="checkbox"/>	Other: _____

### GRADING

YES	NO	ITEM DESCRIPTION
<input type="checkbox"/>	<input type="checkbox"/>	Building square footage (increase/decrease)
<input type="checkbox"/>	<input type="checkbox"/>	Alterations or modifications to civil/grading plans
<input type="checkbox"/>	<input type="checkbox"/>	Site plan changes
<input type="checkbox"/>	<input type="checkbox"/>	Basement
<input type="checkbox"/>	<input type="checkbox"/>	Landscaping
<input type="checkbox"/>	<input type="checkbox"/>	Retaining wall (location/height)
<input type="checkbox"/>	<input type="checkbox"/>	Drainage facilities
<input type="checkbox"/>	<input type="checkbox"/>	Soil report recommendations
<input type="checkbox"/>	<input type="checkbox"/>	Foundations/footings
<input type="checkbox"/>	<input type="checkbox"/>	Other: _____

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